

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span>					
Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>			Date <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span> 08 / 14 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount <span style="border: 1px solid black; padding: 2px;">6442.06</span>		
City AKRON State OH Zip Code 44321		Transaction ID : SE.4487			
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: AL <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6442.06</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶			
Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>			Date <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span> 08 / 14 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount <span style="border: 1px solid black; padding: 2px;">936.40</span>		
City AKRON State OH Zip Code 44321		Transaction ID : SE.4488			
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">936.40</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">7378.46</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature SCOTT B MACKENZIE		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span> 08 / 15 / 2012	

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

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D D D /

Y Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

8513.33

Transaction ID : SE.4489

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: AZ

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

8513.33

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

3904.05

Transaction ID : SE.4490

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: AR

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

3904.05

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

12417.38

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

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SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M /

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Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

49810.46

Transaction ID : SE.4491

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: CA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

49810.46

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

6812.06

Transaction ID : SE.4492

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: CO

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

6812.06

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

56622.52

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 15 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

4867.82

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4493

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: CT

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

4867.82

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

1231.18

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4494

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: DE

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

1231.18

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

6099.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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SCOTT B MACKENZIE

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 5 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

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Y Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

26400.45

Transaction ID : SE.4495

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: FL

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

26400.45

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

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Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

12838.82

Transaction ID : SE.4496

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: GA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

12838.82

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

39239.27

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

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SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date

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# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 6 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

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Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

Amount

City

AKRON

State

OH

Zip Code

44321

1875.70

Transaction ID : SE.4497

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: HI

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

1875.70

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

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Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

Amount

City

AKRON

State

OH

Zip Code

44321

2027.59

Transaction ID : SE.4498

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: ID

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

2027.59

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

3903.29

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date

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# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 7 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date MM / DD / YYYY <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>17125.43</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4499</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>IL</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>17125.43</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date MM / DD / YYYY <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>8621.87</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4500</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>IN</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>8621.87</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>25747.30</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**08 / 15 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 8 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

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D D D /

Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

Amount

City

AKRON

State

OH

Zip Code

44321

4097.60

Transaction ID : SE.4501

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: IA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

4097.60

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

Amount

City

AKRON

State

OH

Zip Code

44321

3763.51

Transaction ID : SE.4502

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: KS

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

3763.51

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

7861.11

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Signature



# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

5868.59

Transaction ID : SE.4503

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004Office Sought: ☐ House State: KY  
☐ Senate District: 00  
☒ PresidentCheck One: ☐ Support ☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

5868.59

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

6058.30

Transaction ID : SE.4504

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004Office Sought: ☐ House State: LA  
☐ Senate District: 00  
☒ PresidentCheck One: ☐ Support ☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

6058.30

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

11926.89

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 15 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 10 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div>	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div> <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1856.01</div>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4505</b>	
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House State: <b>ME</b> <input type="checkbox"/> Senate District: <b>00</b> <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1856.01</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div> <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">7854.80</div>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4506</b>	
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House State: <b>MD</b> <input type="checkbox"/> Senate District: <b>00</b> <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">7854.80</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">9710.81</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date

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Y Y Y Y Y Y Y Y

  
**08 / 15 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 11 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

9083.17

Transaction ID : SE.4507

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: MA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

9083.17

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City

AKRON

State

OH

Zip Code

44321

Amount

13285.79

Transaction ID : SE.4508

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: MI

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

13285.79

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

22368.96

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date MM / DD / YYYY <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>7128.64</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4509</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>MN</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>7128.64</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date MM / DD / YYYY <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>3905.40</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4510</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>MS</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>3905.40</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>11034.04</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**08 / 15 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 13 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

8059.70

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4511

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: MO

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

8059.70

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

1359.79

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4512

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: MT

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

1359.79

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

9419.49

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 14 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

City  
AKRONState  
OHZip Code  
44321

Amount

2423.18

Transaction ID : SE.4513

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: NE

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

2423.18

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

City  
AKRONState  
OHZip Code  
44321

Amount

3609.68

Transaction ID : SE.4514

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: NV

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

3609.68

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

6032.86

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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08 / 15 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 15 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City  
AKRONState  
OHZip Code  
44321

Amount

1819.62

Transaction ID : SE.4515

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: NH

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

1819.62

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City  
AKRONState  
OHZip Code  
44321

Amount

11880.10

Transaction ID : SE.4516

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: NJ

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

11880.10

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

13699.72

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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Y Y Y Y Y Y Y Y

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 16 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

Amount

City

AKRON

State

OH

Zip Code

44321

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: NM

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

2739.06

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Transaction ID : SE.4517

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

Amount

City

AKRON

State

OH

Zip Code

44321

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: NY

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

26603.89

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Transaction ID : SE.4518

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

29342.95

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date

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# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 17 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date MM / DD / YYYY <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>12914.98</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4519</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>NC</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>12914.98</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date MM / DD / YYYY <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>933.77</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4520</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>ND</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>933.77</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>13848.75</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date MM / DD / YYYY  
**08 / 15 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 18 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date MM / DD / YYYY <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>15514.26</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4521</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>OH</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>15514.26</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date MM / DD / YYYY <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>5004.44</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4522</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>OK</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>5004.44</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>20518.70</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**08 / 15 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 19 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

  

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date M M M / D D D / Y Y Y Y Y Y <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>5272.15</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4523</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House    State: <b>OR</b> <input type="checkbox"/> Senate    District: <b>00</b> <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>5272.15</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

  

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date M M M / D D D / Y Y Y Y Y Y <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>17494.53</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4524</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House    State: <b>PA</b> <input type="checkbox"/> Senate    District: <b>00</b> <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>17494.53</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>22766.68</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature \_\_\_\_\_ Date M M M / D D D / Y Y Y Y Y Y  
**08 / 15 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 20 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

1457.80

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4525

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: RI

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

1457.80

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

6307.24

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4526

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: SC

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

6307.24

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

7765.04

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
08 / 15 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 21 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

1088.27

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4527

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: SD

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

1088.27

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y  
08 / 14 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

8607.67

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4528

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type 004

Office Sought:

☐ House

State: TN

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

8607.67

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

9695.94

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 22 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date MM / DD / YYYY <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>32799.10</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4529</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>TX</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>32799.10</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date MM / DD / YYYY <b>08 / 14 / 2012</b>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <b>3394.74</b>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4530</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: <b>UT</b> District: <b>00</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>3394.74</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>36193.84</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY  
**08 / 15 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 23 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><div>M M M</div><div> </div></div> <div><div>D D D</div><div> </div></div> <div><div>Y Y Y Y Y Y Y Y</div><div> </div></div> </div>	

  

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date <div style="display: flex; justify-content: space-around;"> <div><div>M M M</div><div>08</div></div> <div><div>D D D</div><div>14</div></div> <div><div>Y Y Y Y Y Y Y Y</div><div>2012</div></div> </div>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">877.05</div>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4531</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House State: <b>VT</b> <input type="checkbox"/> Senate District: <b>00</b> <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">877.05</div>			

  

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>		Date <div style="display: flex; justify-content: space-around;"> <div><div>M M M</div><div>08</div></div> <div><div>D D D</div><div>14</div></div> <div><div>Y Y Y Y Y Y Y Y</div><div>2012</div></div> </div>	
Mailing Address <b>325 SPRINGSIDE DR</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10941.93</div>	
City <b>AKRON</b>	State <b>OH</b>	Zip Code <b>44321</b>	Transaction ID : <b>SE.4532</b>
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>	Category/ Type <b>004</b>	Office Sought: <input type="checkbox"/> House State: <b>VA</b> <input type="checkbox"/> Senate District: <b>00</b> <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARAK HUSSEIN OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">10941.93</div>			

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">11818.98</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

Signature \_\_\_\_\_

[Electronically Filed]

Date

M M M

08

D D D

15

Y Y Y Y Y Y Y Y

2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 24 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

Amount

City

AKRON

State

OH

Zip Code

44321

9198.43

Transaction ID : SE.4533

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: WA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

9198.43

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

Amount

City

AKRON

State

OH

Zip Code

44321

2577.40

Transaction ID : SE.4534

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: WV

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

2577.40

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

11775.83

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Signature



# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 25 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00524454		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>			Date <span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">14</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>		
Mailing Address 325 SPRINGSIDE DR			Amount <span style="border: 1px solid black; padding: 2px;">7686.37</span>		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.4535
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Office Sought: <input type="checkbox"/> House    State: WI <input type="checkbox"/> Senate    District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7686.37</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b>			Date <span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">14</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>		
Mailing Address 325 SPRINGSIDE DR			Amount <span style="border: 1px solid black; padding: 2px;">759.29</span>		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.4536
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Office Sought: <input type="checkbox"/> House    State: WY <input type="checkbox"/> Senate    District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">759.29</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<span style="border: 1px solid black; padding: 2px;">8445.66</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures.....▶			<span style="border: 1px solid black; padding: 2px;"></span>		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">SCOTT B MACKENZIE</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date <span style="border: 1px solid black; padding: 2px;">08</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2012</span></p>					

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 26 OF 26  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

Amount

898.52

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.4537

Purpose of Expenditure  
VOTER CONTACT CALLSCategory/  
Type

004

Office Sought:

☐ House

State: DC

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

898.52

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date

M M /

D D /

Y Y Y Y Y Y

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

898.52

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

416531.99

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature